		Application or Docket Number										
	PATENT	APPLICATIO	RD		. /							
Effective October 1, 2003 /0/120198												
CLAIMS AS FILED - PART I								ALL E	NTITY		OTHER	THAN
(Column 1) (Column 2)								E C		OR	SMALL	
TO	OTAL CLAIMS		l	6			RAT		FEE]	RATE	FEE
FOR NU				MBER FILED		NUMBER EXTRA		BASIC FEE 385.00		OR	BASIC FEE	770.00
TC	TAL CHARGEA	BLE CLAIMS	∬ minus 20=		*		×	XS 9=		OR	X\$18=	
INC	DEPENDENT CL	minus 3 =		*			X43=		OR	X86=		
MULTIPLE DEPENDENT CLAIM PRESENT							+	+145=		OR	+290=	
* If the difference in column 1 is less than zero, enter "0" in column 2								DTAL		OR	TOTAL	1710
	CLAIMS AS AMENDED - PART II									•	OTHER	THAN
		(Column 1)	(Column			(Column 3)	SI	MALL	ENTITY	OR	SMALL ENTITY	
AMENDMENT A	Silon	CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID	BER DUSLY	PRESENT EXTRA	R	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	. /6	Minus	** 2		=	X	\$ 9=		OR	X\$18=	
	Independent	* /	Minus	*** 2	5	=	X	43=		OR	X86=	·
<u> </u>	FIRST PRESE	NTATION OF MU	JUITPLE DEI	PENDENT	CLAIM		—	145=		OR	+290=	
								TOTAL		ام	TOTAL	
	(Column 1) (Column 2) (Column 3)						ADD	IT. FEE	<u> </u>	JON.	ADDIT. FEE	
		(Column 1) CLAIMS	HIGH						ADDI-	I I		ADDI-
AMENDMENT B		REMAINING AFTER AMENDMENT		PREVICE PAID	USLY	PRESENT EXTRA	R	ATÉ	TIONAL		RATE	TIONAL
	Total	*	Minus	**		=	×	\$ 9= .		OR	X\$18=	
	Independent			TAIDENT CLAIM			×	43=		OR	X86=	
Ĺ	FIRST PRESE	JLTIPLE DEF	TIPLE DEPENDENT CLAIM									
								45=		OR	+290=	
								TOTAL T. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)		. (Colun		(Column 3)				•		
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIC PAID I	BER OUSLY	PRESENT EXTRA	R	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	##		= .	X	9=		OR	X\$18=	
ME	Independent	*	Minus	***		=	X.	13=			X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						<u> </u>			OR	7.00-	
	file and		45=		OR	+290=						
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												
		mber Previously Paid ober Previously Paid					•		propriate box	in col	umn 1.	